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**WOOD, HERRON & EVANS, L.L.P.**

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GREGORY J. LUNN  
KURT L. GROSSMAN  
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SCOTT A. STINEBRUNER  
DAVID H. BRINKMAN  
BEVERLY A. LYMAN, PH.D.  
KRISTI L. DAVIDSON  
  
OF COUNSEL  
JOHN D. POFFENBERGER  
DAVID J. JOSEPHIC  
THOMAS W. FLYNN  
J. DWIGHT POFFENBERGER, JR.  
BRADLEY D. BECK

2700 CAREW TOWER  
441 VINE STREET  
CINCINNATI, OHIO 45202-2917  
TELEPHONE: 513-241-2324  
FACSIMILE: 513-241-6234  
WEBSITE: www.whopatent.com  
PATENT, TRADEMARK, COPYRIGHT  
AND UNFAIR COMPETITION LAW  
AND RELATED LITIGATION

EDMUND P. WOOD 1923-1988  
TRUMAN A. HERRON 1935-1976  
EDWARD B. EVANS 1936-1971

September 14, 2005

JOSEPH R. JORDAN  
C. RICHARD EBY  
  
KATHRYN E. SMITH  
P. ANDREW BLATT, PH.D.  
DAVID E. JEFFERIES  
WILLIAM R. ALLEN, PH.D.  
JOHN PAUL DAVIS  
DOUGLAS A. SCHOLER  
BRETT A. SCHATZ  
DAVID W. DORTON  
SARAH OTTE GRABER  
STEVEN W. BENINTENDI, PH.D.  
RANDALL S. JACKSON, JR.  
  
TECHNICAL ADVISORS  
HENRY M. LABODA, PH.D.

**FACSIMILE COVER SHEET**

To: Commissioner For Patents  
United States Patent Office

From: Wayne L. Jacobs

Fax: 1-571-273-8300

Re: Our File: HILB-771  
Serial No. 10/686,373 filed 10/15/03

Pages: 21 (including cover sheet)

**MESSAGE/COMMENTS**

Attached for immediate filing are Transmittal, Fee Transmittal For FY 2005, Petition For Extension of Time (3 months), Response Under 37 C.F.R. §1.111 (15 pages), Replacement Drawing Sheet for Fig. 2A-3C, and Annotated Drawing Sheet for Fig. 2A-3C. Please confirm receipt of these documents via return facsimile. Thank you.

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PTO/SB/21 (09-04)

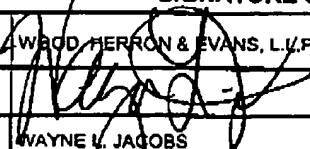
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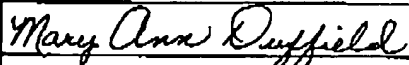
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/686,373	
	Filing Date	10/15/03	
	First Named Inventor	Gary Cunningham	
	Art Unit	3677	
	Examiner Name	William L. Miller	
Total Number of Pages in This Submission	20	Attorney Docket Number	HILB-771

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD. Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<b>Remarks</b> Attached for filing are Fee Transmittal for FY 2005, Petition For Extension of Time (3 months), Response Under 37 C.F.R. Sec. 1.111 (15 pages), Replacement Sheet of Fig. 2A-3C and an annotated sheet of Fig. 2A-3C.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	WOOD, HERRON & EVANS, L.L.P.	
Signature		
Printed name	WAYNE L. JACOBS	
Date	SEPTEMBER 14, 2005	Reg. No. 35,553

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	MARY ANN DUFFIELD	Date 09/14/05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/09/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4518).**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,820.00

**Complete if Known**

Application Number	10/686,373
Filing Date	10/15/03
First Named Inventor	Gary Cunningham
Examiner Name	William L. Miller
Art Unit	3677
Attorney Docket No.	HILB-771

**METHOD OF PAYMENT (check all that apply)**

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 23-3000 Deposit Account Name: Wood, Herron & Evans, LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		
	<b>Multiple Dependent Claims</b>	<b>Fee (\$)</b>
		<b>Fee Paid (\$)</b>

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 4 additional independent claims (\$800), 3-month ext. time (\$1,020) **Fees Paid (\$)** \$1,820**SUBMITTED BY**

Signature

Name (Print/Type) Wayne L. Jacobs

Registration No. 35,553  
(Attorney/Agent)

Telephone 513-241-2324

Date September 14, 2005

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